



## INTENT TO APPLY FORM

This Intent to Apply (ITA) form is REQUIRED of applicants who intend to apply for funding through the Clean Water State Revolving Fund (SRF) or Strategic Water Quality Initiatives Fund (SWQIF).

**Deadlines:** This form may be submitted at any time. This form must be submitted on or before December 31, for consideration for funding the following fiscal year (final project plan due July 1). The ITA expires in one year and must be resubmitted each year by December 31 if the project(s) did not get ranked on the previous Project Priority List (PPL), or did not proceed with funding. If changes (scope, cost, etc.) are made to project(s) submitted with the initial ITA (including projects listed as future on the PPL), an updated form is required by the following December 31 to remain on the PPL.

**Pre-Application Meeting:** The Applicant Contact will be contacted by the assigned Revolving Loan Section (RLS) project manager within 14 days of receipt of this ITA to discuss scheduling a pre-application meeting. This meeting is mandatory in most cases and may be held in person (preferred) or via conference call. Required attendees will include the RLS project manager, MDEQ district engineer, and applicant representative(s). Optional attendees may include the consulting engineer, public works staff and/or certified operator, RLS technical support staff, MDEQ enforcement staff (if applicable) and/or district compliance staff, other funding agencies, or other interested parties.

**Questions:** Please visit our website at [www.michigan.gov/cleanwaterrevolvingfund](http://www.michigan.gov/cleanwaterrevolvingfund) or call 517-284-5433.

**DEQ Use Only:** RLS Project Manager \_\_\_\_\_

District Engineer \_\_\_\_\_ Project Number \_\_\_\_\_

### CONTACT INFORMATION

Applicant Legal Name:

Mailing Address (street, city, state, zip+4):

Applicant Contact Name:

Title:

Mailing Address (street, city, state, zip+4):

Phone No.:

Email:

Consulting Engineer Name\* (if applicable):

Firm:

Mailing Address (street, city, state, zip+4):

Phone:

Email:

\*Qualifications-Based Selection (QBS) Process Disclaimer – The SRF requires a community to use a QBS process for selecting an architectural/engineering consultant for those costs to be included in a SRF loan. This applies to all planning, design, and construction activities, including costs related to a pre-application meeting and preparation of project planning documents. Please refer to the QBS guidance documents for further information.

### PROJECT INFORMATION

Project Need (check all that apply): ☐Public Health Issue ☐Water Quality Issue ☐Discharge Permit Violations ☐Capacity ☐Structural Integrity ☐CSO Separation ☐Infiltration/Inflow Removal ☐Enforcement Action ☐Total Maximum Daily Load ☐Other:

Project Description (Please attach planning area map):

Project Location (street address or nearest cross streets):

City/Village/Township:	
County:	
Borrower Population:	
Population Served by Project:	
Treatment Facility Name (if applicable):	
NPDES or Groundwater Discharge Permit No. (if applicable):	
Name of Watershed Management Plan (if applicable):	
Estimated Total Project Cost:	Estimated SRF Loan Amount:
Other Funding Sources (check all that apply): <input type="checkbox"/> None <input type="checkbox"/> Cash <input type="checkbox"/> Bond <input type="checkbox"/> MDOT <input type="checkbox"/> MEDC <input type="checkbox"/> USDA Rural Development <input type="checkbox"/> Other:	
Proposed Construction Start Date (mm/yyyy):	Proposed Construction End Date (mm/yyyy):
In which fiscal year do you intend to apply?	
Is this a multi-segmented project (multiple loans or projects)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe:	
Existing Planning Documents (check all that apply; do not need to submit at this time): <input type="checkbox"/> None <input type="checkbox"/> Capital Improvements Plan <input type="checkbox"/> Asset Management Plan <input type="checkbox"/> Preliminary Engineering Report <input type="checkbox"/> Environmental Report <input type="checkbox"/> Project Plan <input type="checkbox"/> Infiltration & Inflow Study <input type="checkbox"/> Sanitary Sewer Evaluation Study <input type="checkbox"/> NASSCO Report <input type="checkbox"/> Watershed Management Plan <input type="checkbox"/> Master Plan <input type="checkbox"/> Other:	
Will this project be combined with other projects? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe:	
<b>ADDITIONAL INFORMATION</b>	
Disadvantaged Community?** <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown **For a preliminary determination from the MDEQ, complete and attach Form EQP 3530.	
Does the proposed project include any green infrastructure, water or energy efficiency improvements, or other environmentally innovative activities that may qualify for Green Project Reserve (GPR) funding? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, please describe:	
Additional Information:	
Form Completed By:	
Title:	Date:

Please submit the form and any applicable attachments by email to DEQ-DWMAD-Revolving LoanSection@michigan.gov or by mail to:

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
DRINKING WATER AND MUNICIPAL ASSISTANCE DIVISION  
REVOLVING LOAN SECTION

**Mailing Address:**

PO BOX 30817  
LANSING MI 48909-8311

**Delivery Address:**

CONSTITUTION HALL 4<sup>TH</sup> FLOOR SOUTH  
525 W ALLEGAN STREET  
LANSING MI 48933